Implementation Tool: Observer Version

Directions: This form can be used for multi-session curricula or brief presentations. Please fill out one form for each session in the curriculum or presentation that you observe.

Person Completing Form:_____ **Location of Session:**_____

Name of Curriculum (if applicable):_____

Session Title (and # if applicable): _____

Date of Session:_____ **Length of Session (in min.)**: _____ **# Participants**:_____

1. Overall, how much did the educator have to change the session/presentation from the way it is presented/written in the curriculum or presentation outline?   ❑ None   ❑ A little   ❑ A lot

2. For each of the activities or parts of this session, please indicate the name of the activity or part, and whether or not you completed it and whether or not you modified it. Modifications might include changing the order of the lesson, adding new content or activities, or changing the way something is taught (e.g., making something into a game or using pairs instead of small groups for an activity). If the educator modified an activity or teaching strategy, please describe the changes made. You may need to add or delete rows to match the curriculum/presentation you are observing.

Activity Check-Off Sheet				
Name of Activity or Part of Session (write in name e.g., refusal skill role play)	**Was this completed?** (mark one, 'X')		**If educator modified the <u>content</u>, please describe the modifications made** (e.g., changed order, added or supplemented with other content)	**If educator modified the <u>teaching strategies</u>, please describe the modifications made** (e.g., used pairs instead of small groups)
	Yes, per session outline	**Yes, but it was changed**	**No**		

3. Please circle on option for each of the following questions.

	Not at all		**Somewhat**		**Very**
3a. How interested, in general, were the participants during the session? Please comment on your rating:	1	2	3	4	5
3b. How engaged/on task were the participants during the session? Please comment on your rating:	1	2	3	4	5

4. What part of this session or presentation do you think had the most impact on participants? Please explain.

5. Please describe any challenges in implementation that you observed.

6. Are there ways this lesson could be changed to make it more effective? ❑ Yes ❑ No
   If yes, please describe what changes you think should be made.